

NEW CONCEALED HANDGUN

- 1-COMplete APPLICATION AND HAVE
NOTARIZED.
- 2- COMPLETE PHYSICAL AND
MENTAL HEALTH RELEASE FORM
AND HAVE NOTARIZED.
- 3- SIGN DO'S AND DON'T FORM
- 4- ATTACH COPY OF YOUR DD214
(SERVICE DISCHARGE PAPERS)
- 5- ATTACH ORIGINAL CERTIFICATE
FROM FIREARM SAFETY AND
TRAINING COURSE

FEE.....\$90 CASH ONLY

NON-REFUNDABLE

CALL FOR AN APPOINTMENT

TO TURN IN APPLICATION

919-718-4561

JOYCE PHILLIPS EXT#5

OR

LISA BLACK EXT#6

STATE OF NORTH CAROLINA

APPLICATION FOR CONCEALED HANDGUN PERMIT

Name of Applicant (Last, First, Middle, Maiden) ▶ Attach listing of all previous addresses and all name changes including location and court file number (If Applicable)

- ☐ NEW PERMIT ☐ RENEWAL PERMIT
☐ DUPLICATE ☐ EMERGENCY TEMPORARY PERMIT

Street Address		Date of Birth	Social Security Number (See Notification on page 3)	
City	State	Zip Code	Driver's License Number (State ID Number if no driver's license)	
Mailing Address		Military Status	Race	Sex
Telephone Number	County of Residence	Eyes	Height	Weight
		Other Physical Description		

APPLICATION

I, the undersigned applicant, being duly sworn, hereby make application for a North Carolina Concealed Handgun Permit and state that the following information is correct to the best of my knowledge.

(Check Appropriate Boxes)

1. Are you a citizen of the United States? (1) ☐ Yes ☐ No
2. Are you 21 years of age or older? (2) ☐ Yes ☐ No
3. Have you been a resident of North Carolina for 30 days or longer immediately preceding the date of this application? (3) ☐ Yes ☐ No
4. Do you suffer from a physical or mental infirmity that prevents the safe handling of a handgun? (4) ☐ Yes ☐ No
5. Have you successfully completed an approved firearms safety and training course which involved the actual firing of handguns and instruction in the laws of North Carolina governing the carrying of a concealed handgun and the use of deadly force? ▶ If Yes, attach documentation (5) ☐ Yes ☐ No*
- * If No: Do you meet the retired law enforcement officer exception in N.C.G.S. § 14-415.12(A)? * ☐ Yes ☐ No
▶ If Yes, attach documentation
6. Are you ineligible to own, possess, or receive a firearm under the provisions of state or federal law? (6) ☐ Yes ☐ No
7. Are you under indictment or has a finding of probable cause been entered against you for a pending felony charge? (7) ☐ Yes ☐ No
8. Have you been adjudicated guilty in any court of a felony? (8) ☐ Yes* ☐ No
* If Yes: Have your firearm rights been restored pursuant to N.C.G.S. § 14-415.4? * ☐ Yes ☐ No
▶ If Yes, attach documentation
9. Are you a fugitive from justice? (9) ☐ Yes ☐ No
10. Are you an unlawful user of (or addicted to) marijuana, alcohol, or any depressant, stimulant, or narcotic drug, or any other controlled substance as defined in 21 U.S.C. § 802? (10) ☐ Yes ☐ No
11. Are you currently or have you been previously adjudicated or administratively determined to be lacking mental capacity or mentally ill? (11) ☐ Yes ☐ No
12. Have you been discharged from the U.S. Armed Forces under conditions other than honorable? (12) ☐ Yes ☐ No
13. Have you been adjudicated guilty of, or received a prayer for judgment continued for, or received a suspended sentence for, one or more crimes of violence constituting a misdemeanor, including but not limited to, a violation of the disqualifying criminal offenses listed page 3 of this form? ▶ See "List of Disqualifying Criminal Offenses" on page 3 (13) ☐ Yes ☐ No
14. Have you had an entry of prayer for judgment continued for a criminal offense which would disqualify you from obtaining a handgun permit? (14) ☐ Yes ☐ No
15. Are you free on bond or personal recognizance pending trial, appeal, or sentencing for a crime which would disqualify you from obtaining a concealed handgun permit? (15) ☐ Yes ☐ No
16. Have you been convicted of an impaired driving offense under G.S. 20-138.1, 20-138.2, or 20-138.3 within three years prior to the date of this application? (16) ☐ Yes ☐ No

- ☐ I hereby apply for temporary emergency permit for a nonrenewable period of up to 45 days based upon the information set forth below. I reasonably believe that an emergency situation exists which may constitute a risk of safety to me, my family, or my property.

State Grounds for Temporary Emergency Permit (Use attachment if necessary)

SWORN TO AND SUBSCRIBED TO BEFORE ME

Date

Date

Signature of Person Authorized to Administer Oaths

Signature of Applicant

Title

Date Commission Expires

SEAL

CAUTION

Federal law and State law on the possession of handguns and firearms may differ. If you are prohibited by federal law from possessing a handgun or a firearm, you may be prosecuted in federal court. A State permit is not a defense to a federal prosecution.

SHERIFF USE ONLY

Check List — check applicable boxes

- | | | | |
|--|--------------------------|---|--------------------------|
| 1. Nonrefundable permit fee paid | <input type="checkbox"/> | 8. Date issued Temporary Permit: | <input type="checkbox"/> |
| 2. One full set of fingerprints administered by the Sheriff's Office | <input type="checkbox"/> | 9. Date denied Temporary Permit: | <input type="checkbox"/> |
| 3. Original certificate of completion
of approved firearms safety & training course | <input type="checkbox"/> | 10. Date issued Permit: | <input type="checkbox"/> |
| 4. Renewal — Waiver of Application Firearm Safety & Training Course | <input type="checkbox"/> | Permit Number: | |
| 5. Attachment(s) (specify): | <input type="checkbox"/> | 11. Date denied Permit: | <input type="checkbox"/> |
| 6. Temporary documentation | <input type="checkbox"/> | 12. Date submitted to SBI: | <input type="checkbox"/> |
| 7. Other: | <input type="checkbox"/> | 13. NIC'S Transaction Number (NTN): | <input type="checkbox"/> |

Signature of Sheriff: _____

Original — Sheriff / Copy — SBI / Copy — Applicant

Disqualifying Offense Chart

Federal Prohibitions		Purchase Permit	Concealed Handgun Permit
1.	Convicted of a Crime Punishable by Imprisonment for a Term Exceeding 1 year <i>Note: A person would not be ineligible under this criteria if the person has been pardoned for the crime or conviction, the crime or conviction has been expunged or set aside, or the person has had their civil rights restored, and under the law where the conviction occurred, the person is not prohibited from receiving or possessing any firearm.</i>	Prohibitor	Prohibitor
2.	Fugitive from Justice		
3.	Unlawful Users of/ or Addicted to Any Controlled Substance	Prohibitor	Prohibitor
4.	Adjudicated as Mental Defectives or Have Been Committed to a Mental Institution	Prohibitor	Prohibitor
5.	Are Aliens and Are Illegally or Unlawfully in the United States	Prohibitor	Prohibitor
6.	Dishonorable Discharge (DC) or Dismissal from the Armed Forces	Prohibitor	Prohibitor
7.	Renounced Their Citizenship	Prohibitor	Prohibitor
8.	Subject to a court order that restrains them from harassing, stalking, or threatening an intimate partner or child of such intimate partner, or from engaging in other conduct that would place the partner or child in reasonable fear of bodily injury	Prohibitor	Prohibitor
9.	Convicted in any court of a Misdemeanor Crime of Domestic Violence	Prohibitor	Prohibitor
10.	Under Indictment or Information for a Crime Punishable by Imprisonment for a Term Exceeding One Year	Prohibitor	Prohibitor

State Prohibitions		Purchase Permit	Concealed Handgun Permit
1.	Applicant is ineligible to own, possess, or receive firearm under State or Federal Law	Prohibitor	Prohibitor
2.	Adjudicated as Mental Defectives or Been Involuntary Committed to a Mental Institution	Prohibitor	Prohibitor
3.	Adjudicated by a court or administratively determined by a governmental agency whose decisions are subject to judicial review to be, lacking mental capacity or mentally ill. Receipt of previous consultative services or outpatient treatment alone shall not disqualify an applicant under this subdivision.	N/A	Prohibitor
4.	Sheriff NOT satisfied as to Good Moral Character of applicant	Prohibitor	N/A
5.	Sheriff NOT satisfied that applicant desires weapon for 1) protection of the home, business, person, family or property, 2) target shooting, 3) collecting, or 4) hunting.	Prohibitor	N/A
6.	Dishonorable Discharge (DC) or Dismissal from the Armed Forces	Prohibitor	Prohibitor
7.	Discharged with an Under Other than Honorable Conditions Discharge (UOTHC), Bad Conduct Discharge (BCD) from armed forces	N/A	Prohibitor
8.	Convicted of a Felony <i>If the applicant has been pardoned, depending on the type of pardon, they may or may not be disqualified. You may contact the Law Enforcement Liaison Section of the N.C. Department of Justice at (919) 716-6725 for further guidance.</i>	Prohibitor	Prohibitor
9.	Convicted of an Impaired Driving Offense Under N.C.G.S.20-138.1, 20-138.2 or 20-138.3 Within 3 Years Prior to the Date of Application submission	N/A	Prohibitor
10.	Has Been Adjudicated Guilty or Received Prayer for Judgment Continued or Suspended Sentence for a "Crime of Violence Constituting a Misdemeanor"	N/A	Prohibitor
11.	Has Been Adjudicated Guilty or Received Prayer for Judgment Continued or Suspended Sentence for a Violation of an Offense Under Article 8 of Chapter 14 of the General Statutes (This Encompasses Most Assault Offenses). - Assaults on Handicapped Persons (14-32.1) - Misdemeanor Assaults, Batteries and Affrays (14-33) - Assaulting by Pointing Gun (14-34)	N/A	Prohibitor

State Prohibitions		Purchase Permit	Concealed Handgun Permit
12.	Has Been Adjudicated Guilty or Received Prayer for Judgment Continued or Suspended Sentence for a Violation of any of the following statutes: <ul style="list-style-type: none"> - Harassment of and communication with jurors (14-225.2) - Violating order of court (14-226.1) - Furnishing poison, controlled substances, deadly weapons, cartridges, ammunition or alcoholic beverages to inmates of charitable, mental or penal institutions or local confinement facilities (14-258.1) - Carrying weapons on campus or other education property (14-269.2) - Carrying weapons into assemblies and establishments where alcoholic beverages are sold and/or consumed (14-269.3) - Carrying weapons on state property and courthouses (14-269.4) - Possession and sale of spring-loaded projectile knives (14-269.6) - Impersonation of a fireman, emergency medical services or personnel, law enforcement, or other public officers (14-276.1 and 14-277) - Communicating threats (14-277.1) - Carrying weapons at parades and other public gatherings (14-277.2) - Stalking (14-277.3) - Throwing or dropping of objects at sporting events (14-281.1) - Exploding dynamite cartridges and bombs (14-283) - Riot and inciting to riot (14-288.2) - Fighting or conduct creating a threat of imminent fighting or other violence [14-288.4(a)(1)] - Making or using any utterance, gesture, display or abusive language which is intended and plainly likely to provoke violence retaliation and thereby create a breach of peace [14-288.4(a)(2)] - Looting and trespassing during emergency (14-288.6) - Assault on emergency personnel (14-288.9) - Violations of city State of Emergency Ordinances (14-288.12) - Violations of county State of Emergency Ordinances (14-288.13) - Violations of State of Emergency Ordinances (14-288.14) - Child abuse (14-318.2) - Violations of the standards for carrying a concealed weapon (14-415.21(b)) - Misrepresentation on certification of qualified retired law enforcement officers (14-415.26) 	N/A	Prohibitor
13.	Has had an entry of prayer for judgment continued for a criminal offense which would disqualify the person from obtaining a concealed handgun permit	N/A	Prohibitor
14.	Is free on bond or personal recognizance pending trial, appeal or sentencing for a crime which would disqualify him from obtaining a concealed handgun permit	N/A	Prohibitor
15.	Fugitive from justice	Prohibitor	Prohibitor
16.	Unlawful user of, or addicted to marijuana, alcohol, or any depressant, stimulant or narcotic drug, or any other controlled substance as defined in 21 U.S.C. 802	Prohibitor	Prohibitor
17.	Active Probation (supervised or unsupervised) for any level of offense. (15A-1343(b)(5))	Prohibitor	Prohibitor

Revised: February 23, 2014

Revised 02/23/2014

"DO'S AND DON'TS" OF CARRYING A CONCEALED HANDGUN

1. Your permit to carry a concealed handgun must be carried along with valid identification whenever the handgun is being carried concealed.
2. When approached or addressed by any officer, you must disclose the fact that you have a valid concealed handgun permit and inform the officer that you are in possession of a concealed handgun. You should not attempt to draw or display either your weapon or your permit for the officer unless and until he/she directs you to do so. Your hands are to be kept in plain view and you are not to make any sudden movements.
3. At the request of any law enforcement officer, you must display both the permit and valid identification.
4. You may not, with or without a permit, carry a concealed weapon while consuming alcohol or while alcohol or any substance, controlled or otherwise, is in your blood unless the substance was obtained legally and taken in therapeutically appropriate amounts.
5. You must notify the sheriff who issued your permit of any address change within thirty (30) days of the change of address.
6. If a permit is lost or destroyed, you must notify the sheriff who issued the permit and you may receive a duplicate permit by submitting a notarized statement to that effect, along with the required fee. Do not carry a handgun without it.
7. Even with a permit, you may not carry a concealed handgun in the following areas:
 - a. Any law enforcement or correctional facility;
 - b. Any space occupied by State or federal employees;
 - c. Any premises where the carrying of a concealed handgun is prohibited by the posting of a statement by the controller of the premises;
 - d. Public educational property, however a permittee may secure a handgun in a locked vehicle;
 - e. Areas of assemblies or demonstrations;
 - f. State occupied property;
 - g. Any State or federal courthouse;
 - h. Any area prohibited by federal law;
 - i. Any local government building if the local government has adopted an ordinance and posted signs prohibiting the carrying of concealed weapons.
8. If you are in a vehicle and stopped by a law enforcement officer, you should put both hands on the steering wheel, announce you are in possession of a concealed handgun and state where you have it concealed, and that you are in possession of a permit. Do not remove your hands from the wheel until instructed to do so by the officer.

SIGNATURE

DATE

STATE OF NORTH CAROLINA _____ County	RELEASE OF PHYSICAL AND MENTAL HEALTH, SUBSTANCE ABUSE AND CONFIDENTIAL COURT RECORDS FOR CONCEALED HANDGUN PERMIT	
Name And Address Of Applicant	Date Of Birth	
	Social Security No.	
	State Drivers License No. (State Identification No. If No Drivers License)	State

I hereby authorize and require any and all doctors, hospitals or other providers who have ever provided physical or mental health or substance abuse treatment or care to me, including without limitation the providers named below, to release to the sheriff of the above named county any and all records concerning my physical capacity, mental health, mental capacity or substance abuse that the sheriff may reasonably request in connection with my application for a concealed handgun permit. The purpose of the release is to enable the sheriff to determine my qualification and competence to handle a handgun. I understand that alcohol and substance abuse information is protected by federal regulations and that other confidential records such as psychiatric information may be protected by North Carolina statute. Accordingly, I specifically authorize the release of any and all alcohol, substance abuse and psychiatric information that may be documented in my records.

I understand that further disclosure or redisclosure by the sheriff of any information disclosed to the sheriff pursuant to this Release is prohibited without my further written consent unless otherwise provided for by state or federal law. I understand that I may revoke this authorization at any time except to the extent that action has already been taken in reliance on this Release. Even without my express revocation, this Release will expire upon the satisfaction of the request or one year from the date below, whichever occurs first.

Name Of Provider	Address Of Provider
LEE COUNTY CLERK OF COURT	1408 S HORNER BLVD, SANFORD NC 27330
SANDHILLS CENTER FOR MH/DD	130 CARBONTON ROAD, SANFORD NC 27330
DAYMARK RECOVERY	
HOLLY HILL HOSPITAL	3019 Falstaff Rd, Raleigh, NC 27610
MOORE REGIONAL - HIM	RELEASE OF INFO PO BOX 3000 PINEHURST, NC 28374

I also request and authorize any and all clerks of superior court of North Carolina to inform the sheriff of this County whether or not the clerk's records contain the record of any involuntary commitment proceeding under Article 5 of Chapter 122C of the General Statutes in which I have been named as a respondent and, if so, to reveal to the sheriff any confidential information in the court files or records of each such proceeding that the sheriff may reasonably require in order to determine whether or not to issue a concealed handgun permit to me. This Release may be treated as a motion in the cause within the meaning of G.S. 122C-54(d) and a clerk may reveal information to the sheriff pursuant to any specific or standing order entered in response to or anticipation of this motion.

Any expenses relating to the search, production, copying and certification of a medical or court record pursuant to this Release shall be my responsibility. I authorize the sheriff to photocopy this Release after I sign it, and I authorize any provider to whom a photocopy of this Release is presented to rely on the photocopy as being as effective as the original.

SWORN AND SUBSCRIBED TO BEFORE ME		Date
Date	Signature Of Person Authorized To Administer Oaths	Signature Of Applicant
Title		
Date Commission Expires		

SEAL